## SCHEDULE B (FEC Form 3X)

SCIEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)		LINE k only	one) NUMBEF	₹:	P	PAGE 21/30			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		1b 7	22 [ 28a [	X 23 28b	24 28c	$\vdash$	25 29	26	6 0b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)	e and address of any political co	Jiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	10 501	CIL COLLLII	butions in	om Such	COMMIN	llee		_
American College of Cardiology Political A	ction Committee									
Full Name (Last, First, Middle Initial)				Transa	action ID:	: 04174-	-13140	35573	31010	_ )
Friends of Mike Ferguson					f Disburs		V V	V	V	
Mailing Address C/O Ron Gravino PO Box 225				0 <sup>6</sup> 0		21 /	2 (	o ŏ 6		
City Colonia	State Zip Code NJ 07067			Amour	nt of Each	Disburs	ement	this Pe	eriod	_
Purpose of Disbursement	110 07007						20	00.00	0	l
Contribution		011								
Candidate Name Mike Ferguson		Categor Type	//							
	ment For: 2006 Primary X General									
Senate President	Other (specify)									
State: NJ District: 07										
Full Name (Last, First, Middle Initial)					action ID:	-	81422	20607	72807	7
Friends of Sherrod Brown				Date o	f Disburs	ement	V	· · ·	V	
Mailing Address 2280 Kresge Drive Suite 800				0 6		21 /	<u>'</u> 2 (	) Ď 6		
City Amherst	State Zip Code OH 44001			Amour	nt of Each	Disburs	ement	this Pe	eriod	
Purpose of Disbursement	1.001		_				40	00.00	0	
Contribution		011								
Candidate Name Sherrod Brown	'	Category Type	//							
	ment For: 2006									
X Senate President	Primary X General Other (specify) ▼									
State: OH District:	Carlor (opcomy)									
Full Name (Last, First, Middle Initial)				Transa	action ID:	: 04174-	-77712	26491	10698	3
Geoff Davis for Congress					f Disburs		V * V		v .	
Mailing Address 3161 Dixie Highway Suite F				06	/ D2	21 /	Ž	) Ď 6	<u> </u>	
City Erlanger	State Zip Code KY 41018			Amour	nt of Each	Disburs	ement	this Pe	eriod	1
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Candidate Name Cat			//							
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Cialo. IVI BIOHIOL OT				_						_ 1
SUBTOTAL of Disbursements This Page (optional)			<u> </u>	<u></u>			65	00.00	0	
TOTAL This Period (last page this line number only)			•							